## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10700325

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |  |              |                       |                      |  |           | SMALL ENTITY TYPE |                        | OR       | OTHER THAN SMALL ENTITY |               |
|--|--|--|--------------|-----------------------|----------------------|--|-----------|-------------------|------------------------|----------|-------------------------|---------------|
| TOTAL CLAIMS   |  |  | 20           |                       |                      |  |           | RATE              | FEE                    | 1        | RATE                    | FEE           |
| FOR  |  |  | NUMBER I     | FILED                 | NUMBER EXTRA         |  |           | BASIC FEE         | 385.00                 | OR       | BASIC FEE               | 770.00        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 20 min       | us 20=                | *                    |  |           | X\$ 9=            |                        | OR       | X\$18=                  |               |
| INDEPENDENT CLAIMS   |  |  | 4 mi         | nus 3 =               | *                    |  |           | X43=              |                        | OR       | X86=                    | 86            |
| MULTIPLE DEPENDENT CLAIM P   |  |  | RESENT       |                       | <u> </u>             |  |           | +145=             |                        | 1        | +290=                   |               |
| <b>└</b> ─   | the difference                                 | in column 1 is                                 | less than ze | ro, enter             | "0" in c             | olumn 2                                      |           | TOTAL             | :                      | OR<br>OR | TOTAL                   | 8 <b>5</b> 6  |
| * If the difference in column 1 is less than zero, enter "0" in column CLAIMS AS AMENDED - PART II   |  |  |              |                       |                      |  |           | SMALL             | ENTITY                 | OR       | OTHER<br>SMALL          | THAN          |
|  |  | (Column 1)<br>CLAIMS                           | 1            | (Colur                |                      | (Column 3                                    | 7         | SWALL             |                        |          | OMACC :                 | ADDI-         |
| ENT A  |  | REMAINING AFTER AMENDMENT                      |              | NUM<br>PREVIO<br>PAID | BER<br>OUSLY         | PRESENT<br>EXTRA                             |           | RATE              | ADDI-<br>TIONAL<br>FEE |          | RATE                    | TIONAL<br>FEE |
| AMENDMENT  | Total  | *  | Minus        | **                    |                      | =  |           | X\$ 9=            |                        | OR       | X\$18=                  |               |
| MEN  | Independent                                    | *  | Minus        | ***                   |                      | =  | _         | X43=              |                        | OR       | X86=                    | ·             |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |                       |                      |  |           | +145=             |                        | OR       | +290=                   |               |
| ·  |  |  |              |                       |                      |  |           | TOTAL             |                        |          | TOTAL                   |               |
| ADDIT. FEE   |  |  |              |                       |                      |  |           |                   |                        |          |                         |               |
| _  |  | (Column 1) (Column 2) (Column 2) (Column 2)    |              |                       |                      |  | <u>''</u> |                   | ADDI-                  | 1        |                         | ADDI-         |
| ENT B  |  | REMAINING<br>AFTER<br>AMENDMENT                |              | NUM<br>PREVI<br>PAID  |                      | PRESENT<br>EXTRA                             |           | RATE              | TIONAL<br>FEE          |          | RATE                    | TIONAL<br>FEE |
| AMENDMENT  | Total  | *  | Minus        | **                    |                      | =  |           | X\$ 9=            |                        | OR       | X\$18=                  |               |
| ME   | Independent                                    | *  | Minus        | ***                   |                      | <u>                                     </u> | 4         | X43=              |                        | OR       | X86=                    |               |
|  | FIRST PRESE                                    | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |              |                       |                      |  |           | +145=             |                        | OR       | +290=                   |               |
|  |  |  |              |                       |                      |  |           |                   |                        | OR       | TOTAL<br>ADDIT. FEE     |               |
| (Column 1) (Column 2) (Column 3)   |  |  |              |                       |                      |  |           |                   |                        |          |                         |               |
|  | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \          | CLAIMS   |              | HIGHEST               |                      |  |           |                   | ADDI-                  | 1        | <u> </u>                | ADDI-         |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT                |              | PREVI                 | MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                             |           | RATE              | TIONAL<br>FEE          |          | RATE                    | TIONAL<br>FEE |
|  | Total  | *  | Minus        | **                    |                      | =  | _         | X\$ 9=            |                        | OR       | X\$18=                  |               |
| NE NE  | Independent                                    | *  | Minus        | ***                   |                      | <u>                                     </u> | _         | X43=              |                        | OR       | X86=                    |               |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |                       |                      |  |           |                   |                        | 1        |                         |               |
|  |  |  | +145=        |                       | OR                   | +290=<br>TOTAL                               |           |                   |                        |          |                         |               |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Pald For" IN THIS SPACE is less than 3, enter "3." |  |  |              |                       |                      |  |           |                   |                        |          | ADDIT. FEE              |               |
| "  | alf the "Liteback his                          | imber Previously F<br>nber Previously Pa       | NH EAT IN TL | IIQ QDACE             | is less th           | an 3. enter 3.                               | •         |                   | propriate bo           | ox in c  | olumn 1.                |               |